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INTELLECTUAL PROPERTY LAW

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FACSIMILE COVER SHEET

January 12, 2005

Receiver: Sean P. Shechtman, Patent Examiner, Art Unit 2125

TEL #: (571) 272-3754

FAX #: (703) 872-9306

Sender: Francis T. Kalinski II, Registration No. 44,177

Our Ref. No.: KLA1P095/P1072

Re: U.S. Patent Application No. 10/765,515
File Date: January 26, 2004
Title: *"Defect Detection Using Multiple Sensors and Parallel Processing"*

Pages Including Cover Sheet(s): 10

MESSAGE:

CONFIDENTIALITY NOTE

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: SMITH et al.

Attorney Docket No.: KLA1P095/P1072

Application No.: 10/765,515

Examiner: SHECHTMAN, Sean P.

Filed: January 26, 2004

Group: 2125

Title: DEFECT DETECTION USING
MULTIPLE SENSORS AND PARALLEL
PROCESSING

Confirmation No. 1036

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CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being transmitted by facsimile to fax number 703-872-9306 to the U.S. Patent and Trademark Office on January 12, 2005.

Signed: _____

Sue Funchess

AMENDMENT B TRANSMITTALMail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

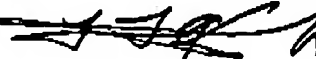
Sir:

Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	13	MINUS	20	0	x 25 =	x 50 = \$-0-
Independent Claims	2	MINUS	3	0	x 100 =	x 200 = \$-0-
Multiple Dependent Claim Present and Fee Not Previously Paid					\$180.00	\$360.00
Total					\$	\$-0-

- ☐ Applicant(s) hereby petition for a _____ month extension(s) of time to respond to the aforementioned Office Action.
- ☒ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-0388 (Order No. KLA1P095).
- ☐ Enclosed is our Check No. _____ in the amount of \$_____ to cover the additional claim fee and/or extension of time fees.
- ☒ Please charge the required fees, or any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 50-0388 (Order No. KLA1P095).

Respectfully submitted,
BEYER WEAVER & THOMAS, LLPFrancis T. Kalinski II
Registration No. 44,177P.O. Box 70250
Oakland, CA 94612-0250

JAN. 12 2005

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: SMITH et al.

Attorney Docket No.: KLA1P095/P1072

Application No.: 10/765,515

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Title: DEFECT DETECTION USING MULTIPLE
SENSORS AND PARALLEL PROCESSING Confirmation No. 1036**CERTIFICATE OF FACSIMILE TRANSMISSION**

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Signed: 

Sue Funchess

AMENDMENT BMail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This Amendment B is in response to the Final Office Action mailed November 12, 2004. Applicants request entry of the following amendments and respectfully request reconsideration of this application based on the amendments and remarks contained herein.

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.